

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL092203	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 04/19/2016
NAME OF PROVIDER OR SUPPLIER CHATHAM COMMONS		STREET ADDRESS, CITY, STATE, ZIP CODE 809 WEST CHATHAM STREET CARY, NC 27512		
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C 000	Initial Comments Report of a Biennial Construction Survey by Frank Strickland and Ed Miller on 04/19/2016. A Complaint Survey was conducted at the same time. Information obtained from the DHSR database indicates that this facility was licensed on 11/01/1982 as a HA. This facility is currently licensed for 80 Beds (including a 30 Bed Special Care Unit). Therefore, this facility was surveyed for conformance with the 1977 Minimum Standards and Regulations for Homes for the Aged, the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and the 1978 (Revision 5) Edition, of the North Carolina State Building Code(s), Institutional Occupancy. Deficiencies have been cited and a Plan of Correction is required.	C 000		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1-Based on observation, the facility does not have current sanitation and fire inspection reports on site. Findings on 04/19/2016: There were no current fire and sanitation reports for the Kitchen/Facility for review on site.	C 111		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 164	<p>Housekeeping and Furnishings-Clean, Repaired</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by: 1-Based on observation, the facility has not maintained the housekeeping of floor surfaces in resident rooms resulting in unpleasant odors. This could eventually affect all residents and staff.</p> <p>Findings on 03/30/2016: The following spaces have urine odors: (a) Room 306 (b) Room 413</p> <p>2-Based on observation, the facility has not maintained and serviced the HVAC supply and return-air grilles to keep them clean.</p> <p>Findings on 04/19/2016: The exhaust grilles have excessive particulate build-up at the following locations: (a) All of the facility Bathroom exhaust fans. (b) Dining Hall return-air grilles. (c) Kitchen return-air grilles.</p> <p>3-Based on observation, the facility has not maintained the HVAC supply and return-air grilles to keep them in good working condition.</p>	C 164		

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C 164	<p>Continued From page 2</p> <p>Findings on 04/19/2016: The supply diffusers are damaged located at the following locations: (a) Dining Hall (c) Kitchen</p> <p>4-Based on observation, the facility has not maintained the condition of wall surfaces in resident rooms and in the corridors.</p> <p>Findings on 04/19/2016: The following locations have damaged wall corners and walls: (a) Kitchen/Janitor wall corner damages and tile base. (b) Room 202 (c) Room 203 (d) Room 414</p> <p>5-Based on observation, the facility has not maintained the resident room closet doors in good repair.</p> <p>Findings on 04/19/2016: The following locations have severely damaged resident room closet doors: (a) Room 204 (b) Room 301 (c) Room 304</p> <p>6-Based on observation, the facility has not maintained the venting of Laundry appliances in good repair.</p> <p>Findings on 04/19/2016: The Main Laundry dryers do not have back-draft dampers installed on the exterior vent pipes.</p> <p>7- Based on Observation, the facility failed to control the spread of chronic unpleasant odors.</p>	C 164		

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C 164	Continued From page 3 This would affect all residents, staff and visitors by exposing them to an unpleasant environment. Findings on 04/19/2016: (a) The Library is adjacent to a screened porch used as the designated smoking area and has a direct access via an exterior door. The smoke and odors from the smoking area drifts into the Library and down the Corridor. The smoking area has an exhaust fan located just outside the door but this fan vents into the attic. In addition, the door has a fly fan that starts up when the door opens that is possibly contributing to the smoke/odor drifting into the Library.	C 164		
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1-Based on observation, the facility has not maintained clearances for appliances to floor drains to be free of hazards. This could effect all residents if they wee to became contaminated. Findings on 04/19/2016: The drain line from the ice-maker does not have a 2 inch air-gap from the floor drain located in the Kitchen. Also, the floor drain in from of the ice-maker is not attached to the drain housing.	C 166		

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C 166	Continued From page 4 2-Based on Observation, the Building was not maintained free of hazards. Findings on 04/19/2016: a. Bedrooms throughout the building - Many towel bars were missing and the mounting brackets were left attached to the door exposing sharp and rough edges. Specific examples include Room 401, 403, 417 and 419.	C 166		
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1-Based on observation, the facility has not maintained towel bars in resident rooms. Findings on 04/19/2016: There are no towel bars at the following locations: (a) Room 302 (b) Room 307 (c) Room 401/403 (Exposed brackets) (d) Room 415 (e) Room 417/419 (Exposed brackets) (f) Room 422 (g) Room 424	C 175		
C 185	Fire Safety-Rehearsals on Each Shift	C 185		

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C 185	Continued From page 5 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official. (c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1-Based on observation, the facility does not have documentation on site of the rehearsals of the fire plan. Findings on 04/19/2016: The quarterly rehearsal fire drills for each shift were not on site for review	C 185		
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.	C 189		

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C 189	<p>Continued From page 6</p> <p>This Rule is not met as evidenced by:</p> <p>1-Based on observation, the facility has not maintained in a safe and operating condition because the noted interior doors do not latch and/or drags on the floor preventing the containment of fire and/or smoke from the room of origin. This could affect all residents and staff in the event of a fire.</p> <p>Findings on 04/19/2016: The doors at the noted locations do not latch or difficulty in operation:</p> <p>(a) 100 Hall Men's Bathroom (Broken Closure Arm) (b) 100 Hall Women's Bathroom (Door drags on floor) (c) Room 204 (d) 200 Hall Bathroom (e) SCU Men's Bathroom (f) Kitchen Office Bathroom door (g) Resident Phone Room (Repaired during survey) (i) Conference Room</p> <p>2-Based on observations, this facility has not been maintained in a safe manner because of breaches through fire-rated construction invalidated its integrity. This could affect all residents and staff in the event that a fire and/or smoke is not contained in a room or compartment of origin.</p> <p>Findings on 04/19/2016: There are smoke detection and life-safety devices located at the following locations with openings in the ceiling that are not sealed with a fire-rated material:</p> <p>(a) All life-safety devices in the Kitchen (b) Boiler Room 100 Hall</p>	C 189		

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C 189	<p>Continued From page 7</p> <p>(c) Refrigerant Line between Rooms 101/103 at ceiling/Hall</p> <p>(d) Employee Lounge/SCU</p> <p>(e) 100 Hall Men's & Women's Bathroom ceiling sheet-rock joints failing</p> <p>(f) Dining Hall ceiling sheet-rock joints failing over dining tables</p> <p>3--Based on observation, the facility has not maintained in a safe manner by improper storage of oxygen cylinders. This could affect all residents and staff by potentially exposing them to hazards for a ruptured ruptured cylinder.</p> <p>Findings on 04/19/2016: There are 2 oxygen bottles in Room 309 not in racks.</p> <p>4-Based on observation, the facility has not maintained the door hardware in heavy use passage ways. This could eventually harm residents, guests and staff.</p> <p>Findings on 04/19/2016: The double doors leading into the Main Dining Hall have attached panic door hardware with no end caps on the actuation bar that expose sharp edges.</p> <p>5-Based on observation, the facility has not maintained the service of the emergency lighting .This could eventually affect all residents and staff in event of an emergency.</p> <p>Findings on 04/19/2016: The wall mounted emergency lighting packs did not illuminated when test at the following locations: (a) Room 301 (b) Nurse's SCU</p>	C 189		

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C 189	<p>Continued From page 8</p> <p>6-Based on observation, the facility has not maintained a clear passage for egress away from the facility in the event of an emergency. This will affect all residents and staff.</p> <p>Findings on 04/19/2016: There was a steel hospital bed on the sidewalk outside the exit door adjacent to Room 427 blocking the path of egress.</p> <p>7-Based on observation, the facility has not maintained the exit signage.</p> <p>Findings on 04/19/2016: The exit sign does not have a lens attached that indicates EXIT that is located adjacent to Rooms 207/2018.</p> <p>8-Based on observations, the facility fire protection equipment was not maintained in a safe manner. This could effect all residents and staff by not providing full sprinkler coverage upon activation.</p> <p>Findings on 04/19/2016: The following locations had dropped and/or missing sprinkler head escutcheons: (a) 100 Hall Women's Bathroom (b) Dining Hall (c) Kitchen (d) Resident Phone Room (e) Resident Room Bathroom 421/423</p> <p>9-Based on observations, the facility failed to maintain the floor surfaces to prevent trip hazards. This will effect all residents and staff.</p> <p>Findings on 04/19/2016: The following locations have floor surfaces that</p>	C 189		

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C 189	Continued From page 9 represent conditions that will lead to a trip hazard: (a) The vinly flooring is becoming unglued in from of the Main Entry Nurse's Station. (b) There is not a threshold installed at the exterior door from the Dining Hall exposing vinyl flooring that has become unglued. 10-Based on observations, the facility failed to maintain the plumbing fixtures. Findings on 04/19/2016: The hair-washing sink does not have a vacuum breaker located in the Salon.	C 189		
D 324	10A NCAC 13F .0906 (d) Other Resident Care And Services 10A NCAC 13F .0906 Other Resident Care And Services (d) Telephone. (1) A telephone shall be available in a location providing privacy for residents to make and receive calls. (2) A pay station telephone is not acceptable for local calls; and (3) It is not the home's obligation to pay for a resident's toll calls This Rule is not met as evidenced by: 1. Based on Observation, the Facility did not always provide access to a teteophone. Findings on April 19, 2016: a. Telephone Room - the corridor door had paper stuffed in the strike plate and covered with tape preventing the door from latching closed. The paper and tape was removed so the corridor door can latch as is required by Building Code.	D 324		

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D 324	Continued From page 10 When the door closes it locks and there are no keys. When the door is closed and locked, access to the telephone is denied.	D 324		